

FEC
FORM 3

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED

2014 APR 15 PM 12:05

Office Use Only **FEC MAIL CENTER**

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

THE PEOPLE FOR DAVID BANACH

ADDRESS (number and street)

4409 PERKINS PL



Check if different
than previously
reported. (ACC)

HELCAUR

MD

21017

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

MD 02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM

DD

YYYY

in the
State of

MD

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM

DD

YYYY

in the
State of

MD

5. Covering Period

01 02 2014

through

04 17 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

MARY CHRISTINE BANACH

Signature of Treasurer

Mary Christine Banach

04

17

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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Use
Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

THE PEOPLE FOR DAVID BANACH

Report Covering the Period:

From:

01' 02' 2014

To:

04' 11' 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	\$377.00	\$896.25
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	\$377.00	\$896.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$272.00	\$601.25
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	\$272.00	\$601.25
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$295.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

14031214670

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 12/2003)

of Receipts

Page 3

Write or Type Committee Name

THE PEOPLE FOR DAVID BANACH

Report Covering the Period:

From:

01 ' 02 ' 2014

To:

09 ' 11 ' 2014

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

\$105.00

\$434.25

(ii) Unitemized.....

72.00

72.00

(iii) TOTAL of contributions
from individuals ▶

\$177.00

\$506.25

(b) Political Party Committees.....

.

.

(c) Other Political Committees
(such as PACs).....

.

.

(d) The Candidate.....

\$200.00

\$390.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

\$377.00

\$896.25

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

.

.

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

.

.

(b) All Other Loans.....

.

.

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

.

.

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

.

.

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

.

.

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

\$377.00

\$896.25

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	, \$272.00	, \$601.25
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	, , .	, , .
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	, , .	, , .
(b) Of All Other Loans	, , .	, , .
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	, , .	, , .
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	, , .	, , .
(b) Political Party Committees.....	, , .	, , .
(c) Other Political Committees (such as PACs)	, , .	, , .
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	, , .	, , .
21. OTHER DISBURSEMENTS	, , .	, , .
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	, \$272.00	, \$601.25

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	, \$190.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	, \$377.00
25. SUBTOTAL (add Line 23 and Line 24).....	, \$567.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	, \$272.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	, \$295.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE		OF	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

THE PEOPLE FOR DAVID BANACH

Full Name (Last, First, Middle Initial)

A. **BANACH, MARY CHRISTINE**

Mailing Address

1476 WABASH DR

City

BEL AIR

State

MD

Zip Code

21015

FEC ID number of contributing
federal political committee.

C

Name of Employer

RAYMOND GEORGE

Occupation

CUST. SERVICE

Receipt For:

☒ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

04' 09' 2014

Amount of Each Receipt this Period

\$72.00

Full Name (Last, First, Middle Initial)

B. **BANACH, DAVID MICHAEL**

Mailing Address

4409 PERKINS PL

City

BEL CAMP

State

MD

Zip Code

21017

FEC ID number of contributing
federal political committee.

C

Name of Employer

BRINKER INTL

Occupation

COOK

Receipt For:

☒ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

04' 04' 2014

Amount of Each Receipt this Period

\$200.00

Full Name (Last, First, Middle Initial)

C. **BUTLER, SEAN**

Mailing Address

216 E 11TH ST #1-B

City

NEW YORK

State

NY

Zip Code

10029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

02' 26' 2014

Amount of Each Receipt this Period

\$5.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

14031214673

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

THE PEOPLE FOR DAVID BANACH

Full Name (Last, First, Middle Initial)

A. **PARRISH, WALTON W.**

Mailing Address

209 HIGHLAND DR

City

State

Zip Code

ELKTON MD 21921

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

03 '04 ' 2014

Amount of Each Receipt this Period

\$100.00

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

14031214674

2014 APR 13 PM 12:03
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14031214675



U.S. POSTAGE
PAID
BALTIMORE, MD
21233
APR 14, 14
AMOUNT
\$16.95
00085644-09

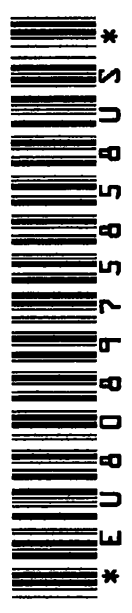
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ORIGIN (POSTAL USE ONLY)	
PO ZIP Code 21233	Day of Delivery <input checked="" type="checkbox"/> Next <input type="checkbox"/> Second
Date In 04/14	Postage \$ 16.95
Time In 5:18 PM	Return Receipt Fee
Weight lbs. 025.	Int'l Alpha Country Code
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials [Signature]
	Insurance Fee
	COD Fee
	Total Postage & Fees \$ 16.95

DELIVERY (POSTAL USE ONLY)	
Delivery Attempt Mo. Day	Time <input type="checkbox"/> AM <input type="checkbox"/> PM
Delivery Attempt Mo. Day	Time <input type="checkbox"/> AM <input type="checkbox"/> PM
Delivery Date Mo. Day	Time <input type="checkbox"/> AM <input type="checkbox"/> PM
Delivery Date Mo. Day	Time <input type="checkbox"/> AM <input type="checkbox"/> PM
<input type="checkbox"/> WAVES OF SIGNATURE (Domestic Only) Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.	
NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	
Customer Signature	

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ZIP + 4 20416	PHONE ()

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RY TIME +
LUDED

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Federal Election Commission
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<input checked="" type="checkbox"/> USPS Priority Mail Express	Postmarked 4/14/14
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="text-align: left;"> PREPARER (8/2013)</div><div style="text-align: right;">4/15/14 DATE PREPARED</div></div>	

14031214676